

PTO/SB/17 (10-08)
Approved for use through 06/30/2010. OMB 0651-0032
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| Effective on 12/08/2004. | | | Complete if Known Application Number 10/562,086-Conf. #3235 | | | | | |
| Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). | | | | | | | | |
| FEE TRANSMITTAL | | | Filing Date December 23 | | | | | |
| For FY 2009 | | | First Named Inventor Peter J. Ques | | | enberry | | |
| | | | Examiner Name V. Afremova | | | | | |
| Applicant cla | ims small entity statu | is. See 37 CFR 1.27 | | Art Unit 1657 | | <u></u> | | |
| TOTAL AMOUNT OF | PAYMENT | (\$) 540.00 | | Attorney Docket | No. | 59441(11259) | | |
| METHOD OF PA | YMENT (check a | all that apply) | | | | | | |
| Check | Credit Card | Money Order | Non | | please identi | · | | |
| X Deposit Accoun | nt Deposit Account N | lumber: 04-1 | 105 | Deposit / | Account Nam | e: Edwards Ange | ll Palmer 8 | Dodge LLP |
| For the abo | ve-identified depo | sit account, the Dir | rector is | | | | | |
| x Charg | ge fee(s) indicated | below | | Charge | e fee(s) in | dicated below, ex | cept for 1 | the filing fee |
| | ge any additional fo under 37 CFR 1.1 | ee(s) or underpayn 16 and 1.17 | nents of | x Credit | any overp | payments | | |
| FEE CALCULAT | TION | | | | | | | |
| 1. BASIC FILING, | | | | | | | | |
| | FIL | ING FEES Small Entity | SEA | ARCH FEES Small Entity | EXAMI | NATION FEES Small Entity | | |
| Application Type | Fee (\$) | | Fee (\$ | | Fee (\$) | | Fees | Paid (\$) |
| Utility | 330 | 165 | 540 | 270 | 220 | 110 | | |
| Design | 220 | 110 | 100 | 50 | 140 | 70 | | |
| Plant | 220 | 110 | 330 | 165 | 170 | 85 | | |
| Reissue | 330 | 165 | 540 | 270 | 650 | 325 | | |
| Provisional | 220 | 110 | 0 | 0 | 0 | 0 | | |
| 2. EXCESS CLAIM | FEES | | | | | | | Small Entity |
| Fee Description Each claim over 20 | (including Reissi | ues) | | | | | Fee (\$) 52 | <u>Fee (\$)</u> 26 |
| Each independent of | claim over 3 (inclu | iding Reissues) | | | | | 220 | 110 |
| Multiple dependent | t claims | | | | | | 390 | 195 |
| Total Claims | Extra Claims | Fee (\$) | Fe | ee Paid (\$) | <u>!</u> | Multiple Depend | ent Claim | <u>s</u> |
| - 58 | or HP | x = | | | <u> </u> | <u>ee (\$)</u> | Fee Paid (| <u>\$)</u> |
| HP = highest number | of total claims paid for, | if greater than 20. | | | | | | <u> </u> |
| Indep. Claims | Extra Claims | | F6 | ee Paid (\$) | | | | |
| | r HP = | x = | 3 | | | | | |
| HP = highest number of independent claims paid for, if greater than 3. | | | | | | | | |
| 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | | |
| Total Sheets | Extra Sheets | <u>Number o</u> | f each a | dditional 50 or frac | tion there | of Fee (\$) | <u>Fee</u> | Paid (\$) |
| - 100 = /50 = (round up to a whole number) x = | | | | | | | | |
| 4. OTHER FEE(S) Fees Paid (\$) | | | | | | | | |
| Non-English Specification, \$130 fee (no small entity discount) | | | | | | | | |
| Other (e.g., late | filing surcharge): | 1401 Notice of | appeal | | | | 5 | 40.00 |
| SUBMITTED BY | 7/ | A | | | | | | |
| Signature | Kathym | U.C. Elkat | BOD | Registration No. (Attorney/Agent) | 34,901 | Telephone | (617) 5° | 17-5516 |
| Name (Print/Type) K | athryn A. Piffat, | Ph.D., Esp. / | | , | | Date | August 3 | 30, 2010 |

PTO/SB/17 (10-08)

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| FEE TRANSMITTAL FOR FY 2009 Application Number 10/562,086-Conf. #3235 Filing Date December 23, 2005 First Named Inventor Peter J. Quesenberry Examiner Name V. Afremova Application Type Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Peter (\$) Sunday Fee (\$) Peter (\$) Sunday Fee (\$) Peter (\$) Fee (\$) Peter (\$) Pet | 7 | Effection on 12mg/2004 | | | Complete if Known | | | | |
|---|-------------|---|-------------------------------------|------------|-------------------|-------------|------------------------|---------------|--------------|
| FIRST Named Inventor Peter J. Quesenberry Examiner Name V. Afremova | | Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). | | | 140 | | 10/562,086-Conf. #3235 | | |
| FOR FY 2009 First Named Inventor Peter J. Quesenberry | | • · · · · · · · · · · · · · · · · · · · | | | Filing Date | | | 2005 | |
| Application Type Fee (\$) Fee (\$) Fee (\$) Part (\$) Part (\$) Pees (\$) P | " | | | Γ | First Named Inve | entor | Peter J. Quesenberry | | |
| METHOD OF PAYMENT (check all that apply) | For FY 2009 | | | — [| Examiner Name | | V. Afremova | | |
| METHOD OF PAYMENT (check all that apply) Check | l | Applicant claims small entity status. See 37 CFR 1.27 | | | Art Unit | | | | |
| Check Credit Card Money Order None Other (please identify): X Deposit Account Deposit Account Number O4-1105 Deposit Account Name Edwards Angell Palmer & Dodge LLP | I | TOTAL AMOUNT OF PAYMENT | (\$) 540.00 | | Attorney Docket N | No. | 59441(11259) | | |
| X Deposit Account Deposit Account Number Q4-1105 Deposit Account Name: Edwards Angell Palmer & Dodge LLP | Ī | METHOD OF PAYMENT (check | all that apply) | | | | | | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below | | Check Credit Card | Money Order | None | Other (p | lease ident | ify): | | |
| Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of contents of the fee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES | ١ | X Deposit Account Deposit Account | Number: 04-11 | 05 | Deposit A | ccount Nam | ne: Edwards Angel | Palmer & | Dodge LLP |
| X Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 X Credit any overpayments X Credit any overpayments X Charge any additional fee(s) under 37 CFR 1.16 and 1.17 X Credit any overpayments Credit and Credit X Credit any overpayments X Credit any overpayments Credit X Credit any overpayments Credit Cred | l | For the above-identified depo | osit account, the Direc | tor is | hereby authorized | d to: (che | eck all that apply) | | |
| FEE CALCULATION | I | X Charge fee(s) indicated | d below | | Charge | fee(s) in | ndicated below, ex | cept for th | e filing fee |
| The specification Type | | Charge any additional fee(s) under 37 CFR 1 | fee(s) or underpayme 16 and 1.17 | nts of | X Credit a | any overp | payments | | |
| Application Type | Ì | FEE CALCULATION | | | | | | | |
| Application Type | ı | 1. BASIC FILING, SEARCH, AND E | XAMINATION FEES | | | | | | |
| Head Column Head | | FI | | SEA | | EXAMI | | | |
| Utility | | Application Type Fee (5 | | ee (\$) | | Fee (\$) | | <u>Fees</u> F | Paid (\$) |
| Design 220 110 100 50 140 70 | | | | | | | | | |
| Reissue 330 165 540 270 650 325 Provisional 220 110 0 0 0 0 0 2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) 52 26 Each independent claim over 3 (including Reissues) 52 20 110 Multiple dependent claims Fotal Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Fee Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1401 Notice of appeal SUBMITTED BY Signature Registration No. A4,901 Telephone (617) 517-5516 | | | 110 | 100 | 50 | 140 | 70 | | |
| Provisional 220 110 0 0 0 0 0 2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) 52 26 Each independent claim over 3 (including Reissues) 52 26 Each independent claim over 3 (including Reissues) 390 195 Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Submitted BY Signature Registration No. A4,901 Telephone (617) 517-5516 | | • | 110 | 330 | 165 | 170 | 85 | | |
| 2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Total Claims Total Claims -58 or HP -6 or HP = x | | Reissue 330 | 165 | 540 | 270 | 650 | 325 | | |
| Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof -100 = | | Provisional 220 | 110 | 0 | 0 | 0 | 0 | | |
| Each claim over 20 (including Reissues) 52 26 | | 2. EXCESS CLAIM FEES | | | | | | | |
| Each independent claim over 3 (including Reissues) Multiple dependent claims 390 195 | | | | | | | | | |
| Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Fee Paid (\$) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filting surcharge): 1401 Notice of appeal Submitted BY Signature All All Registration No. (Attomety/Agent) All All Registration No. (Attomety/Agent) 34,901 Telephone (617) 517-5516 | | Due to Julia o Voi 20 (meruaning resource) | | | | | | - | |
| Total Claims Extra Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims | | • | uaing Keissues) | | | | | - | |
| -58 or HP x = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) — 6 or HP = x = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) — 100 = /50 = (round up to a whole number) x = 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1401 Notice of appeal 540.00 SUBMITTED BY Signature Registration No. (Attorney/Agent) 34,901 Telephone (617) 517-5516 | | · · | - For (6) | E. | o Paid (\$) | 1 | Multiple Donard | | |
| HP = highest number of total claims paid for, if greater than 20. Indep. Claims | | | - | re | | | | | |
| Indep. Claims | | <u> </u> | | | | | <u>ee (4)</u> | co . aiu (4 | 4 |
| HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof [Fee (\$)] Fee Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1401 Notice of appeal SUBMITTED BY Signature Registration No. [Attorney/Agent) A4,901 Telephone (617) 517-5516 | | | | Fe | e Paid (\$) | _ | | | |
| 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets | | | | | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets | | HP = highest number of independent claims | s paid for, if greater than 3. | • | | | | | |
| listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets | | | | | | | | | |
| Total Sheets Extra Sheets Number of each additional 50 or fraction thereof | | listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 | | | | | | | |
| - 100 = | | | | | | | | | |
| 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1401 Notice of appeal 540.00 SUBMITTED BY Signature Registration No. (Attorney/Agent) 34,901 Telephone (617) 517-5516 | | | | | | | | | |
| Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1401 Notice of appeal 540.00 SUBMITTED BY Signature Registration No. (Attorney/Agent) 34,901 Telephone (617) 517-5516 | | | | | | | | | |
| Other (e.g., late filing surcharge): 1401 Notice of appeal 540.00 SUBMITTED BY Signature Registration No. (Attorney/Agent) 34,901 Telephone (617) 517-5516 | | | | | | | | | |
| Signature Routing Co. (Most PC) Registration No. 34,901 Telephone (617) 517-5516 | | | | | | | | | |
| Signature Routing Co. (Most PC) Registration No. 34,901 Telephone (617) 517-5516 | | SUBMITTED BY | 0 | | | | | | |
| | | Signature Registration No. 34,901 Telephone (617) 517-5516 | | | | | 7-5516 | | |
| | | 0, 2010 | | | | | | | |

PTO/SB/21 (07-09)

Approved for use through 07/31/2012. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number 10/562,086-Conf. #3235 Filing Date December 23, 2005 First Named Inventor Peter J. Quesenberry Art Unit 1657 **Examiner Name** V. Afremova Attorney Docket Number 59441(11259)

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|--|---|---|--|--|--|--|
| ENCLOSURES (Check all that apply) | | | | | | |
| x Fee Transmittal Form | X Replacement Drawings (6 pages) | After Allowance Communication to TC | | | | |
| Fee Attached | Licensing-related Papers | Appeal Communication to Board of Appeals and Interferences | | | | |
| Amendment/Reply | Petition | Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) | | | | |
| After Final | Petition to Convert to a Provisional Application | Proprietary Information Status Letter X Other Enclosure(s) (please Identify below): | | | | |
| Affidavits/declaration(s) | Power of Attorney, Revocation Change of Correspondence Address | | | | | |
| Extension of Time Request | Terminal Disclaimer | | | | | |
| Express Abandonment Request | Request for Refund | Letter (2 pages) Marked Drawings (6 pages) | | | | |
| Information Disclosure Statement | CD, Number of CD(s) | Certificate of Express Mailing (1 page Return Receipt Postcard | | | | |
| Certified Copy of Priority Document(s) | Landscape Table on CD | | | | | |
| Reply to Missing Parts/ Incomplete Application | Remarks | | | | | |
| Reply to Missing Parts under 37 CFR 1.52 or 1.53 | | | | | | |
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| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | | | | |
| Firm Name EDWARDS ANGELL PALMER & DODGE LLP | | | | | | |
| Signature Party a. Patas Party | | | | | | |
| Printed name Kathryn A. Piffat, Ph.D., Esq. | | | | | | |
| Date August 30, 2010 | Reg. No. | 34,901 | | | | |